									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 1997										9	098	481	/	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI TYP		NTITY	OR	OTHER SMALL	
FOR		NU	NUMBER FILED NUM			ER E	XTRA		RATE		FEE		RATE	FEE
BASIC	FEE			27.30		A Arrival district				3	395.00	OR		790.00
TOTA			53 minus	20 = *33			١	x\$11=	=	363	OR	x\$22=		
INDE	IMS		27 minus	s3= * 24	3 =   * 24			x41=		984	OR	x82=		
MULTIPLE DEPENDENT CLAIM PRESENT									+135:	=	· O · (	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTA		1742	OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							. (	SMA	LL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINII AFTER AMENDME	NG I		HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 56	,	Minus	** <i>5</i> 3		= 3		x\$11:	=		OR	x\$22=	54-
ME	Independent	* 30	2	Minus	··· 27		= 3		x41=			OR	x82=	234-
<b>▼</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135:	=		OR	+270=	
	(Column 1) (Column 2) (Column 3)							A	TOT DDIT. FI			OR	TOTAL ADDIT. FEE	- 2
AMENDMENT B	B	CLAIMS REMAINI AFTER AMENDMI	NG R		HIGHEST NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA		RATE	Ξ.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 30	)	Minus	" 5k		= /		x\$11	= ]	19	OR	x\$22=	
	Independent	* 14	1	Minus	··· 30		_		x41=	=	19-1	OR	x82=	
<b>∠</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135	=		OR	+270=	
(Column 1) (Column 2) (Column 2)						(Column 3)	A	TOT DDIT. F		0	OR	TOTAL ADDIT. FEE		
CLAIMS HIGHEST							]				1			
ENT C		REMAINI AFTER AMENDM	3		NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	3	Minus	- 56	•	= 0		x\$11	=	Ñ	OR	x\$22=	
AMENDMENT	Independent	. 14	P	Minus	··· 30	,	= 8		x41=	=	0	OR	x82=	
<b> </b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135	=	<del></del>	OR	+270=	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										0	OR	TOTAL ADDIT. FEE	
<u>"</u>	tne "Hignest Nu he "Highest Num	nber Previous	ly Paid	d For" (Total o	r Independent) is	s the h	o, enter "3." nighest number f		ADDIT. F	_	riate box in	column		